

# CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

WALTER M. DICKIE, M.D., Director

## Weekly Bulletin

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EDITOR

## *A Review of the Past Two Years*

The State Board of Public Health of California has been operating continuously in this state for a full half century. Beginning as an organization without funds and without authority, it has grown, under the present administration of state government, into a full-fledged department which is receiving full support, enabling it to enforce the necessary laws for safeguarding the public health in California.

The reorganization of the State Board of Health into the State Department of Public Health in 1927 has brought added efficiency, growth and expansion; it has, in fact, introduced a new era in the public health of this state.

### DEPARTMENTAL REPORTS

**Communicable Disease Control.** Together with the tremendous natural growth of population in California there has come an unprecedented migration to this state. The migration factor, alone, has added many intricate and complex problems in the control of communicable diseases. This applies not only to migration from other states, but also to migration from foreign countries, chiefly Asiatic countries, where many severe and highly fatal communicable diseases are rampant. California faces, continually, acute problems in the prevention of plague, imported epidemic meningitis, virulent smallpox and other infectious diseases which have, during the past two years, been imported into this state from foreign countries.

To be prepared against the invasions of these devastating diseases is of the utmost necessity, for the threat of many acute infections, uncommon to us but common in Asiatic countries, hangs over us continually. Through the maintenance of our present state public health organization we are able to offer resistance and provide safeguards against these menaces to our community health.

**Epidemic Meningitis.** The year 1929 brought the largest number of cases of this disease that has ever occurred during any one year in the history of the state. The situation in California was particularly complicated because of the direct importation of a large number of cases in Filipinos. The situation in June of that year became so serious that the President of the United States issued an official embargo, restricting the migration of certain individuals from Oriental ports. The State Department of Public Health was active in applying control

measures in this emergency and played no small part in bringing the outbreak under control.

**Plague.** This disease, which has been sleeping and waking in California during the past thirty years, has lain dormant during the last biennial period. Only two human cases of this disease have occurred during the past two years, but the State Department of Public Health is working continually in the control of this disease among rodents, chiefly ground squirrels, in order that the people of California may be protected against a flare-up of this highly fatal disease. Crews of men have been kept in the rural districts, at all times, for the purpose of gathering and examining ground squirrels for the presence of plague. Wherever infected rodents have been discovered, intensive campaigns of extermination have been carried on. The cooperation of many counties and cities has been secured in carrying on this work. In order to protect the state against the plague menace, rodent control work must be carried on at all future times, until no more infected rodents may be found.

**Unusual Diseases.** The highly trained staff of the State Department of Public Health has been able to accomplish considerable work during the past two years in the control of several of the unusual but highly fatal and disastrous communicable diseases. The general public has little information relative to these diseases because of their unusual occurrence. They are highly important, however, and require careful attention in order that they may be kept within bounds. This applies particularly to diseases such as coccidioidal granuloma, botulism, Rocky Mountain spotted fever, psittacosis, trichinosis, typhus fever, tularemia and other diseases.

**Typhoid Fever.** The accomplishments of California in the control of typhoid fever are most outstanding. The typhoid fever mortality rate for 1929 was the lowest in the history of the state (only 1.7 persons out of every 100,000 of the population having died of this disease). There were but 95 such deaths within the state. During the past four years the death rate from this disease has been reduced 25 per cent. In 1906, thirty-two Californians out of every 100,000 in the population died of this disease. Had the 1906 typhoid death rate prevailed in 1929 there would have been nearly 1800 deaths from typhoid fever instead of the 95 which actually occurred. The credit for this remarkable record is due to the provision of pure water



supplies, the improvement in general sanitary conditions and the immunization of individuals against the disease. The achievement is the more remarkable because California is obliged to draw largely from surface streams for its public water supplies.

**Tuberculosis.** The tuberculosis death rate has fallen from 127.7 per 100,000 population in 1925 to 106.3 in 1929. This is a reduction of almost 17 per cent. In 1906, the death rate for this disease was 235.7 per 100,000 population. The drop from this high rate to 106.3 per 100,000 in 1929 indicates the progress that has been made in tuberculosis control in California.

The Bureau of Tuberculosis of the State Department of Public Health has been active in raising the standards of care in county hospitals by means of the state subsidy to approved institutions, such funds being appropriated from the state treasury and allocated to the counties for expenditure.

**Imported Tuberculosis.** The problems related to the migration of tuberculosis cases in advanced stages to California, particularly to southern California, are very acute. This applies not only to migration from other states, but also to migration from Mexico. In 1928, 453 individuals, who had lived in California less than a year, died of tuberculosis, and 894 such deaths during that year occurred in individuals who had lived in California for periods varying from one to four years. About 20 per cent of all tuberculosis deaths in California are among Mexicans. Some of the counties of southern California are required to spend many thousands of dollars in the care and treatment of these foreign-born residents. If more satisfactory accomplishments in shutting off the tide of this immigration were made available, considerable might be accomplished in reducing the tuberculosis mortality rate of this state. It is doubtful if any other state in the Union makes such excellent efforts in the care and treatment of its indigent patients. This alone is an enormous factor in reducing the mortality rate. Continuation of this program will continue to lower the death rate of this disease still farther.

#### CHILD WELFARE

**Crippled Children.** The State Department of Public Health began working in the interest of crippled children in October of 1928, the legislature of 1927 having made provision for the treatment of physically handicapped individuals who are under 18 years of age. The department became empowered to make surveys and conduct clinics for the purpose of finding crippled children who might lack medical attention for the relief of their physical disabilities. Under this law, parents of such children, upon certification by the judge of the superior court of the county within which they reside, may secure, through the intercession of the State Department of Public Health, competent treatment under the direction of the department, but at the ultimate expense of the county within which the patient resides. Since October of 1928, nearly 200 crippled children have received treatment under the provisions of this act, and the surveys conducted by the department have located no less than 1485 crippled children within the state. These surveys have resulted in the provision of treatment by a wide variety of agencies without resorting to the use of the Crippled Child Act. Since work under this act has been carried on, 2095 home visits or investigations of cases have been made in 51 counties of the state. Repeated visits to hospitals for crippled children, and convalescent homes, and a number of special surveys, particularly of paralyzed children, whose paralysis resulted from the widespread epidemic of infantile paralysis in 1927, have been made.

**Reduction in Infant Mortality.** The past decade has been called the Golden Age for children. Every possible attribute for the development of child welfare has been brought into play. The result is shown in the reduced infant mortality rate, which is regarded, generally, as the most sensitive index to public health conditions that we possess. This rate is the number of infant deaths per 1000 live births. The 1929 infant mortality

rate for California was 63. The reduction in this rate during the past ten years from 75 to 1920 to 63 in 1929 indicates the progress that has been made in the conservation of infant lives. Credit for the reduction may be given to the activities of child hygiene workers throughout the state. Under the State Bureau of Child Hygiene children in all parts of California, where adequate facilities are not available, may secure physical examinations for the purpose of discovering defects, and mothers may be given educational advice in the proper care and upbringing of their children. Conferences for well babies, physical examinations for children of preschool age, mothers' classes, lectures, instruction in child care, prenatal advice, and other services constitute the bulk of the work of this bureau. There is significance in the fact that, through the reduction in the infant mortality rate, the lives of at least 3000 infants have been saved during the past two years.

**Prevention of Maternal Deaths.** The Bureau of Child Hygiene, with its staff of women physicians, provides adequate prenatal advice to prospective mothers, particularly in the rural districts, where such advice is not readily available. Demonstrations are given in the technic of prenatal care, and literature upon allied subjects is distributed. During the past two years many consultations with expectant mothers have been conducted and more than 8200 sets of prenatal letters have been distributed.

The bureau also conducts the inspection and licensing of maternity homes and hospitals. This, too, is a factor in the provision of better care at childbirth. The maternal death rate in California has fallen from 6.7 deaths per 1000 births in 1923, to 5.2 in 1929.

#### FOODS

**Cannery Inspection.** California canneries, which operate steam retorts for the cooking of vegetable, meat or fish products, are required to obtain licenses from the State Department of Public Health and all of the products which they pack are placed under inspection, the cooking being under the regulations devised by the department. There are 150 canneries in California which are so licensed. This service is maintained entirely through funds contributed by the canners themselves, who pay into the state treasury a self-imposed tax which is based on the number of cans which they purchase. All commercially packed meat, fish or vegetable products from California canneries are given a code number by which the temperature and duration of cooking of every such can can be determined at any time and at any place that the container may be opened. Complete records are available by which these data may be traced through the code numbers on the can. Since the cannery inspection law went into effect in 1925, no outbreaks of food poisoning due to the use of commercially canned California products have occurred anywhere.

**Food Inspections.** The Bureau of Foods and Drugs of the State Department of Public Health maintains a continuous inspection of food products and food-dispensing places within the state. Through this service many tons of foods which are unfit for human consumption are destroyed. There is an increasing evidence of a rise in food standards, however, and each year the amount of condemned food products grows less. In addition to this service, all foods which are consumed in the state hospitals and other state institutions are examined and analyzed in order to make sure that they conform to the high standards of quality and food value which the state requires in foods which are consumed by its wards.

#### VARIOUS PUBLIC HEALTH SAFEGUARDS

**General Sanitation.** The development of sanitation everywhere throughout the state is conspicuous to even the untrained eye. Groceries, markets, creameries, restaurants, soft drink stands and many other food-dispensing places show particular advances in the provision of sanitary equipment and the use of sanitary methods in the manufacture and dispensing of their products. The sanitary inspection service of the State Department of Public Health has been largely instrumental



in the carrying on of campaigns for the development of sanitation in such places. There is no way to measure the results in the prevention of disease that have been obtained through these methods, but the esthetic values are highly important as well as the commercial aspects.

**Water Supplies.** The provision of adequate water supplies for large centers of population becomes more acute as the large cities grow with a speed that is nothing short of miraculous. Public water supplies in California are of the highest purity. Since surface streams are used largely, all public water supplies must be treated in order to make certain of their potability. The State Department of Public Health has stimulated activity among communities which draw their water supplies from surface sources. Not a single epidemic of water-borne typhoid has occurred within California since 1924.

**Sewage Disposal.** The rapid growth of population in all the cities of the state also creates intricate problems in the provision of proper sewage disposal. The State Department of Public Health provides technical assistance leading to the solution of such problems. It passes upon the design of sewage disposal systems and, under the law, issues permission for their construction. The advance in the design of both large and small sewage disposal systems is conspicuous and the State Department of Public Health is responsible, in a large degree, for the progress that has come in methods of sewage disposal.

During the past two years, in addition, the state administration has made provision for research work in sewage disposal. This is of the utmost value in providing solutions to many problems which are baffling at the present time. With the development of the state's industries the proper disposal of industrial wastes becomes increasingly important. The proper disposal of such wastes requires special studies because of their varied composition.

#### PUBLIC HEALTH PROBLEMS

**Mortality in Adults.** The increasing mortality from diseases of the heart and circulatory system, cancer and other diseases of adult life, occupies the attention of the general public. Twenty-five per cent of all deaths in California are now due to diseases of the heart and circulatory system. The increase in the number of deaths from heart disease during the past ten years has been gradual, but persistent. Eventually, man must, of necessity, die of some condition, and the truth of this statement is borne out in the fact that 60 per cent of all the deaths from heart disease in this state are in persons who are more than 65 years of age at the time of death. This would seem to indicate that direct effort in the prevention of heart disease would be hopeless. Nevertheless, the lives of many individuals who are suffering from this disease might be extended for many years if they were made aware of their physical limitations and if they would follow sound advice relative to treatment and precautions.

**Cancer.** Cancer deaths exceeded tuberculosis deaths in California, for the first time, in 1928, and the increase of cancer over tuberculosis mortality was even more conspicuous in 1929. The high cancer death rates in California are due, in a measure, to the migration of elderly adults who come here to spend their lives under our favorable climatic conditions. Increased facilities for diagnosis and improvement in methods of making diagnosis are also responsible for bringing many cases of this disease under treatment. There are certain public health aspects of both the cancer problem and of problems related to heart disease which are incapable, and it is probable that during the future years health departments everywhere will exercise more direct supervision over these diseases which take such a heavy toll among adult lives. Public health in the past (and at the present time) has concerned itself chiefly with the application of preventive methods among children and among young adults. It would seem now that in the future its field must, of necessity, be extended to provide similar service to all people of the state.

#### LIST OF DISEASES REPORTABLE BY LAW

ANTHRAX	OPHTHALMIA NEONATORUM
BERI-BERI	PARATYPHOID FEVER
BOTULISM	PELLAGRA
CHICKENPOX	PLAGUE
CHOLERA, ASIATIC	PNEUMONIA (Lobar)
COCCIDIOIDAL GRANULOMA	POLIOMYELITIS
DENGUE	RABIES (Animal)
DIPHTHERIA	RABIES (Human)
DYSENTERY (Amoebic)	ROCKY MOUNTAIN
DYSENTERY (Bacillary)	SPOTTED (or Tick) FEVER
ENCEPHALITIS (Epidemic)	SCARLET FEVER
ERYSIPELAS	SMALLPOX
FLUKES	SYPHILIS*
FOOD POISONING	TETANUS
GERMAN MEASLES	TRACHOMA
GLANDERS	TRICHINOSIS
GONOCOCCUS INFECTION*	TUBERCULOSIS
HOOKWORM	TULAREMIA
INFLUENZA	TYPHOID FEVER
JAUNDICE (Infectious)	TYPHUS FEVER
LEPROSY	UNDULANT (Malta) FEVER
MALARIA	WHOOPING COUGH
MEASLES	YELLOW FEVER
MENINGITIS (Meningococcic)	
MENINGITIS (Cerebrospinal)	
MUMPS	

\*Reported by office number. Name and address not required.

#### QUARANTINABLE DISEASES

CEREBROSPINAL MENINGITIS (Epidemic)	POLIOMYELITIS
CHOLERA, ASIATIC	SCARLET FEVER
DIPHTHERIA	SMALLPOX
ENCEPHALITIS (Epidemic)	TYPHOID FEVER
LEPROSY	TYPHUS FEVER
PLAGUE	YELLOW FEVER

#### THE YEAR IN RETROSPECT

The year 1930 has been, generally, a year of good health for California. The communicable diseases, with the exception of measles and epidemic poliomyelitis, have not been present in epidemic form. Excluding measles, of which disease more than 45,000 cases have been reported in California this year, fewer cases of communicable diseases have occurred within the state this year than occurred during the year 1929.

Vital statistics records for 1930 indicate an increase of about 5 per cent in the number of births that have occurred this year, and during the first eight months of 1930 the tabulations show appreciable decreases in the numbers of deaths that have occurred this year. Fewer marriages have occurred in 1930. During years of economic depression the numbers of marriages are generally reduced. In so far as the records of communicable disease, births and deaths are concerned, the year 1930 has set high standards in public health. Whether these records can be equaled in 1931 is questionable. The early recovery of our lowered economic condition will have great bearing upon the public health record for 1931.

Mediocre minds ordinarily condemn everything that passes their comprehension.—*La Rochefoucauld*.



**MORBIDITY\*****Diphtheria.**

46 cases of diphtheria have been reported, as follows: Berkeley 1, Los Angeles County 6, Burbank 1, Glendale 2, Inglewood 1, Los Angeles 12, Santa Monica 2, South Pasadena 1, Gardena 1, Sacramento 1, San Bernardino 1, San Diego 1, San Joaquin County 1, Tracy 3, Santa Clara County 1, Watsonville 2, Solano County 2, Vacaville 1, Tulare County 3, Exeter 1, Lindsay 1, Visalia 1.

**Scarlet Fever.**

76 cases of scarlet fever have been reported, as follows: Berkeley 1, Crescent City 1, Fresno County 1, Sanger 1, Kern County 1, Los Angeles County 16, El Segundo 1, Huntington Park 1, Inglewood 1, Long Beach 4, Los Angeles 15, San Fernando 1, Hawthorne 1, Maywood 1, Bell 1, Merced County 2, Huntington Beach 1, Santa Ana 1, Roseville 2, Riverside 2, Sacramento 1, Upland 1, San Diego County 2, San Diego 1, San Francisco 7, San Luis Obispo County 1, South San Francisco 2, Sonoma County 1, Sutter County 1, Yuba City 1, Tulare County 1, Ventura County 1, Woodland 1.

**Measles.**

109 cases of measles have been reported, as follows: Alameda 1, Oakland 1, San Leandro 5, Bakersfield 1, Kings County 1, Los Angeles County 2, Alhambra 1, Azusa 3, Burbank 1, Glendale 2, Glendora 5, Hermosa 1, La Verne 1, Long Beach 1, Los Angeles 5, Redondo 6, Monterey County 1, Fullerton 1, Riverside County 2, Ontario 1, Upland 11, San Diego 1, San Luis Obispo 16, Modesto 1, Tulare County 3, Exeter 6, Lindsay 4, Visalia 21, Ventura County 4.

**Smallpox.**

21 cases of smallpox have been reported, as follows: Ala-

meda 1, Fresno County 2, Los Angeles 4, Napa County 1, Napa 1, Stockton 1, Vallejo 1, Modesto 4, Sutter County 1, Tulare County 5.

**Typhoid Fever.**

7 cases of typhoid fever have been reported, as follows: Coalinga 1, Los Angeles County 1, Los Angeles 2, San Jose 1, Red Bluff 1, Tulare County 1.

**Whooping Cough.**

48 cases of whooping cough have been reported, as follows: Alameda 2, Berkeley 9, Oakland 2, Kern County 5, Los Angeles County 6, Los Angeles 2, Monrovia 1, San Fernando 2, Santa Monica 4, Sacramento 2, San Bernardino 1, Coronado 2, San Diego 2, San Francisco 6, San Jose 2.

**Poliomyelitis.**

12 cases of poliomyelitis have been reported, as follows: Oakland 1, Los Angeles County 1, Glendale 1, Los Angeles 2, Merced County 1, Sacramento County 1, San Bernardino 1, San Francisco 3, Modesto 1.

**Meningitis (Epidemic).**

8 cases of epidemic meningitis have been reported, as follows: Emeryville 1, Los Angeles County 1, Los Angeles 2, San Francisco 2, Tulare County 1, Visalia 1.

**Encephalitis (Epidemic).**

Oakland reported one case of epidemic encephalitis.

**Undulant Fever.**

4 cases of undulant fever have been reported, as follows: Long Beach 1, Fullerton 1, Santa Ana 1, San Diego County 1.

\* From reports received on December 29th and 30th for week ending December 27th.

**COMMUNICABLE DISEASE REPORTS**

Disease	1930.				1929			
	Week ending			Reports for week ending Dec. 27 received by Dec. 30	Week ending			Reports for week ending Dec. 28 received by Dec. 31
	Dec. 6	Dec. 13	Dec. 20		Dec. 7	Dec. 14	Dec. 21	
Botulism	0	0	0	0	0	0	1	0
Chickenpox	387	508	195	151	414	453	243	233
Coccidioidal Granuloma	0	1	0	0	2	1	1	0
Diphtheria	66	69	64	46	101	85	93	67
Dysentery (Amoebic)	0	5	5	0	0	0	3	0
Dysentery (Bacillary)	2	7	4	2	0	0	1	8
Encephalitis (Epidemic)	0	0	0	1	1	0	0	1
Erysipelas	7	14	9	14	15	20	13	15
Food Poisoning	0	0	0	0	29	0	0	0
German Measles	10	6	6	2	11	6	9	9
Gonococcus Infection	145	197	142	83	135	122	114	49
Hookworm	1	0	0	0	1	0	0	0
Influenza	69	50	73	57	77	86	43	39
Leprosy	0	0	1	0	1	1	0	0
Malaria	0	0	0	1	2	0	1	1
Measles	270	233	230	109	192	319	240	203
Meningitis (Epidemic)	7	5	5	8	7	21	12	14
Mumps	220	229	117	54	408	428	287	205
Ophthalmia Neonatorum	0	0	1	0	1	0	0	0
Paratyphoid Fever	0	0	1	0	0	1	2	0
Pellagra	2	1	1	1	1	1	0	3
Pneumonia (Lobar)	85	61	78	65	96	121	68	59
Poliomyelitis	13	15	21	12	3	1	1	1
Rabies (Animal)	18	22	20	12	16	13	18	5
Scarlet Fever	108	111	95	76	360	404	268	208
Smallpox	43	52	54	21	40	65	50	60
Syphilis	162	203	169	119	149	130	158	93
Tetanus	0	3	0	2	2	0	0	0
Trachoma	1	7	6	0	1	2	1	4
Trichinosis	0	0	2	0	0	0	3	11
Tuberculosis	250	231	197	119	187	177	176	135
Tularemia	0	0	0	0	0	1	0	0
Typhoid Fever	17	5	11	7	7	5	9	4
Typhus Fever	0	1	0	0	0	0	0	0
Undulant Fever	0	3	0	4	0	1	1	2
Whooping Cough	109	116	91	48	101	108	83	46
Totals	1,992	2,155	1,598	1,014	2,360	2,572	1,899	1,475

Reports indicate declines in all of the reportable diseases.

The year 1930 has been a year of good records, generally.

The epidemic of acute anterior poliomyelitis in 1930 was the most outstanding exception.

May 1931 be a year of good health.